## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09753033

| CLAIMS AS FILED - PART I   |  |   |                                      |                               |                                       |                                     |          |               | SMALL ENTITY           |         |                     | THAN                   |
|--|--|---|--------------------------------------|-------------------------------|---------------------------------------|-------------------------------------|----------|---------------|------------------------|---------|---------------------|------------------------|
|  |  |   | (Column 1)                           |                               | (Column 2)                            |                                     | TY       | TYPE          |                        |         | SMALL               | ENTITY                 |
| TOTAL CLAIMS   |  |   | 25                                   |                               |                                       |                                     | F        | RATE          | FEE                    |         | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED                         |                               | NUMBER EXTRA                          |                                     | ВА       | SIC FEE       | 355.00                 | OR      | BASIC FEE           | 710.00                 |
| то   | TAL CHARGEA  | BLE CLAIMS                                | 2 minus 20=                          |                               | . 3                                   |                                     | >        | X\$ 9=        |                        | OR      | X\$18=              | 54.00                  |
| IND  | EPENDENT CL  | AIMS                                      | minus 3 =                            |                               | 2                                     |                                     | ;        | X40=          |                        | OR      | X80=                | 240-00                 |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                                      |                               | *****                                 |                                     | <b>_</b> | -135=         |                        | OR      | +270=               |                        |
| * If the difference in column 1 is less than zero, enter   |  |   |                                      |                               | r "0" in column 2                     |                                     |          | OTAL          |                        | OR      | TOTAL/              | 04-00                  |
|  | CI   | LAIMS AS A                                | MENDED                               | - PART II                     |                                       |                                     |          |               |                        | •       | OTHER               | THAN                   |
|  |  | (Column 1)                                |                                      | (Colu                         | nn 2) (Column 3)                      |                                     |          | SMALL ENTITY  |                        |         | SMALL               | ENTITY                 |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                      | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                          | PRESENT<br>EXTRA                    | F        | RATE          | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
| NDM  | Total  | *   | Minus                                | **                            |                                       | =                                   | . >      | X\$ 9=        |                        | OR      | X\$18=              |                        |
| AME  | Independent  | *   | Minus                                | ***                           | T OL A184                             |                                     | ;        | X40=          |                        | OR      | X80=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |                                      |                               |                                       |                                     | <b>\</b> | ·135=         |                        | OR      | +270=               |                        |
|  |  |   |                                      |                               |                                       |                                     |          | TOTAL         |                        | OR      | TOTAL<br>ADDIT. FEE |                        |
|  |  | ADI                                       | DIT. FEE                             |                               |                                       | אטטוו. רכבן                         |          |               |                        |         |                     |                        |
| _  |  | (Column 1)<br>CLAIMS                      |                                      | HIGH                          | mn 2)<br>HEST                         | (Column 3)                          |          | <u>T</u>      | ADDI-                  |         |                     | ADDI-                  |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                                      | PREVI                         | MBER<br>OUSLY<br>FOR                  | PRESENT<br>EXTRA                    | F        | RATE          | TIONAL                 |         | RATE                | TIONAL<br>FEE          |
|  | Total  | •   | Minus                                | **                            |                                       | =                                   | ,        | X\$ 9=        |                        | OR      | X\$18=              |                        |
|  | Independent  | •   | Minus                                | ***                           |                                       | =                                   |          | X40=          |                        | OR      | X80=                |                        |
| lacksquare   | FIRST PRESENTATION OF MULTIPLE DEPENDEN  |   |                                      |                               | T CLAIM                               |                                     |          |               |                        |         |                     |                        |
|  |  |   |                                      |                               |                                       |                                     |          | ·135=         |                        | OR      | +270=               |                        |
|  |  | ADI                                       | TOTAL<br>DIT. FEE                    |                               | OR                                    | TOTAL<br>ADDIT. FEE                 |          |               |                        |         |                     |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |                                      |                               |                                       |                                     |          |               |                        |         |                     |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                      | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR          | PRESENT<br>EXTRA                    | F        | RATE          | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
| NOM  | Total  | •   | Minus                                | **                            |                                       | =                                   |          | <b>K\$</b> 9= |                        | OR      | X\$18=              | Ï                      |
| ME   | Independent  | •   | Minus                                | ***                           | · · · · · · · · · · · · · · · · · · · | =                                   |          | X40=          |                        | OR      | X80=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDEN  |   |                                      |                               | T CLAIM                               |                                     | ▎┢╌      | 135=          |                        |         |                     | <u> </u>               |
|  | * If the contraction column 1 is loss than the entry in column 2 write "0" in column 2 |   |                                      |                               |                                       |                                     |          |               |                        | OR      | +270=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |                                      |                               |                                       |                                     |          |               |                        |         |                     |                        |
|  | If th "Highest Nu<br>The "Highest Nun  | imber Previously F<br>nber Previously Pa  | 'aid For" IN TH<br>aid For" (Total o | IS SPACE<br>Ir Independ       | is less tha<br>dent) is that          | an 3, enter "3."<br>e highest numbe | •        |               | oropriat box           | x in co | lumn 1.             |                        |